

South Florida Water Management District Pumpage Report

This report must be completed and submitted to the South Florida Water Management District as required by your Permit.

Please Complete Iter	ns 1 thru 9		
1. Permit Number:			
2. Issued to:			
Address:	-		
City State Zip:	-		
Phone Number:	As required by your parent		
3. Recording Period:	As required by your permi		
4. Report Due:	As required by your permi	I .	
5. Month	Year		1
		16	GALLONS
1	GALLONS	17	GALLONS
2	GALLONS	18	GALLONS
3	GALLONS	19	GALLONS
4	GALLONS	20	GALLONS
5	GALLONS	21	GALLONS
6	GALLONS	22	GALLONS
7	GALLONS	23	GALLONS
8	GALLONS	24	GALLONS
9	GALLONS	25	GALLONS
10	GALLONS	26	GALLONS
11	GALLONS	27	GALLONS
12	GALLONS	28	GALLONS
13	GALLONS	29	GALLONS
14	GALLONS	30	GALLONS
15	GALLONS	31	GALLONS
Trada Marada I. D. arras a		olo al Long	
Total Monthly Pumpage		0 GALLONS	
6. Accounting Method:			
	of the following: flow meter, time	e clock fuel other (please	write in)
7. Date of Last Bi-annual	-	o diodit, radi, daridi (pidadi	winto mij
(as required			
8. Name of Person Comp			
9. Signature		Date	
SEN[South Florida Water	Management District	Date	
Attn: Water Use 432	•		
Post Office Box 246			
West Palm Beach, F			
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